



Application for Change/Transfer of Water Right

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WA State Department
of Ecology (SWRO)

For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION
IF FILED WITH THE DEPARTMENT OF ECOLOGY**

(Check all that apply.)

- ☒ Change purpose(s) of use
☐ Add purpose(s) of use
☐ Change point(s) of diversion/withdrawal
☐ Add point(s) of diversion/withdrawal
☐ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: _____

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL
SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

FOR OFFICIAL USE ONLY

DATE APPLICATION RECEIVED 11-8-12
CHECK NO. _____ FEE \$ _____
DATE ACCEPTED 11-8-12 BY SC
CHANGE NO. G2-20972
COUNTY Pierce WRIA 11
SPECIAL AREA _____

SEPA: ☐ EXEMPT ☐ NOT EXEMPT

ECY CODING: 001-002-WR10285-000011

APP NO. _____ PERMIT NO. _____

CERT NO. _____ CERT OF CHG NO. _____

X I have participated in a pre-application conference with Ecology.

1. Applicant Information

APPLICANT/BUSINESS NAME Wilcox Farms, Inc.	PHONE NO. 800-568-6456	FAX NO.
ADDRESS 40400 Harts Lake Valley Rd		
CITY Roy	STATE WA	ZIP CODE 98580
EMAIL ADDRESS (IF AVAILABLE)		

CONTACT (IF DIFFERENT FROM ABOVE) Robert N. Caldwell	PHONE NO. (206) 963-2864	FAX NO.
ADDRESS 1400 N 80th Suite 202		
CITY Seattle	STATE WA	ZIP CODE 98103
EMAIL ADDRESS (IF AVAILABLE) robertncaldwell@gmail.com		

LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF USE Wilcox Farms, Inc.	PHONE NO. 800-568-6456	FAX NO.
ADDRESS 40400 Harts Lake Valley Rd		
CITY Roy	STATE WA	ZIP CODE 98580
EMAIL ADDRESS (IF AVAILABLE)		

2. Water Right Information

WATER RIGHT OR CLAIM NUMBER G2-20972	RECORDED NAME(S) Wilcox Farms Inc.
DO YOU OWN THE RIGHT TO BE CHANGED? X YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: _____	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Wells 6,7, and 11		NW	NW	7	16N	3E	0316072000	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: X YES ☐ NO PROPOSED: X YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME: _____

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Group domestic supply		6.5	Continuously
Dairy farm operation		246.5	Continuously
Poultry farm operation		78.5	Continuously

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Group domestic supply		6.5	Continuously
Poultry and other farm operations		190	Continuously
Environmental benefit		135	Continuously

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
All of Section 7, TWP 16N, R. 3 E.W.M; Except E½SE¼; N½ Govt. Lot 4; E¼NE¼; and except County Road Rights-of-Way							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		7	16N	3E	Pierce		
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? X YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: _____							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
All of Section 7, TWP 16N, R. 3 E.W.M; Except E½SE¼; N½ Govt. Lot 4; E¼NE¼; and except County Road Rights-of-Way							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		7	16N	3E	Pierce		
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? X YES <input type="checkbox"/> NO							
IF NO, PROVIDE OWNER(S) NAME: _____							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

X YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): G2-22107 is supplemental to this right.

6. Remarks and Other Relevant Information:

Well No. 6 is located 1,050 ft east and 1,225 ft south of the NW corner of Section 7. This well is described as Well No. 4 in the original certificate. Well No. 7 is located 1,060 ft east and 1,200 ft south of the NW corner of Section 7. This well is described as Well No. 5 in the original certificate. Well No. 11 is located 1,350 feet east and 625 feet south of the NW corner of Section 7. This well was not included in the original certificate.

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. For further information, contact: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. Phone (360) 570-3265.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I hereby grant staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in preparing this above application, I understand that all responsibility for the accuracy of the information rests with me.

<u>J.T. Wilcox</u> Applicant Printed Name - Title	<u>[Signature]</u> Applicant Signature	<u>10/30/2012</u> (Date)
<u>J.T. Wilcox</u> Water Right Holder Printed Name	<u>[Signature]</u> Water Right Holder Signature	<u>10/30/2012</u> (Date)
<u>J.T. Wilcox</u> Land Owner of Existing Place of Use Printed Name	<u>[Signature]</u> Land Owner of Existing Place of Use Signature	<u>10/30/2012</u> (Date)
 Land Owner of Proposed Place of Use Printed Name	 Land Owner of Proposed Place of Use Signature	 ____/____/____ (Date)

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input checked="" type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- | | |
|---|---|
| <input type="checkbox"/> APPLICATION FEE NOT ENCLOSED | <input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE |
| <input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED | <input type="checkbox"/> SECTION _____ IS INCOMPLETE |
| <input type="checkbox"/> OTHER/EXPLANATION: _____ | |

STAFF: _____ DATE: ____/____/____

Attachment Table 1. Total volume pumped for non-irrigation uses based on water meter data.

	Total volume pumped for non-irrigation uses (acre-feet/year)	Data (months)
2010	183	10.7
2009	162	12
2007/2008	175	14
2007	178.5	interpolated
2006	182	interpolated
2005	185.5	interpolated
1993 to 2004	189	135